

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	67810	6/13/00
O.I.P.E. CLASSIFIER		49	6/13/00
FORMALITY REVIEW	<i>[Signature]</i>	71531	8-9-00
RESPONSE FORMALITY REVIEW			4/30/01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	
2	0	0	
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6	0	0	
7	0	0	
8	0	0	
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10	0	0	
11	✓	✓	
12	0	0	
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20	0	0	
21	✓	✓	
22	✓	✓	
23	0	0	
24	0	0	
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26	✓	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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